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UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Mustafa Pinarbasi

Atty Ref.: SJO9-2000-0199US1

Serial No.: 09/900,688

Group Art Unit: 2653

Filed: July 6, 2001

Examiner: Magee, Christopher R.

For: **"METHOD FOR FABRICATING SEED LAYER FOR SPIN VALVE SENSOR
FOR MAGNETIC HEADS FOR HARD DISK DRIVES"**

RESPONSE TO RESTRICTION REQUIREMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

Dear Sir:

Responsive to the Election/Restriction Requirement mailed September 30, 2004,
Applicant elects Group I, claims 1-6 and 18-42 for further prosecution, without traverse.

Should the Examiner have any questions or comments a telephone conference at the
number set forth below is requested.

Respectfully submitted,

Date: October 25, 2004

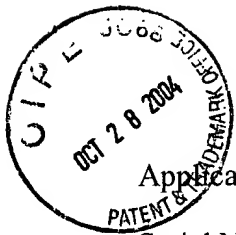
ROBERT O. GUILLOT
Reg. No. 28,852

IPLO®
Intellectual Property Law Offices
1901 S. Bascom Avenue, Suite 660
Campbell, CA 95008
Telephone: (408) 558-9950
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CERTIFICATE OF MAILING (37 CFR 1.8(a))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited on October 25, 2004 with the U.S. Postal Service as first class mail in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
Date: October 25, 2004

Patricia Beilmann



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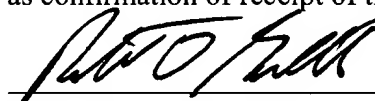
For: **"METHOD FOR FABRICATING SEED LAYER FOR SPIN VALVE SENSOR
FOR MAGNETIC HEADS FOR HARD DISK DRIVES"**

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

- ☒ Transmitted herewith is a Response to Restriction Requirement for this application.
- ☒ Applicant is
☐ a small entity.
☒ other than a small entity.
- ☐ Attached is a check in the sum of \$_____.
- ☐ Charge Account No. 08-3240 the sum of \$_____.
A duplicate of this transmittal is attached.
- ☒ In the event that: a) no check to cover the filing fee is enclosed, b) any above-referenced check is inadvertently omitted or lost, or c) any enclosed check is in an amount less than or greater than the required fee, the Commissioner is authorized to charge any required fees, additional fees, or credit any overpayment to Deposit Account 08-3240. A duplicate of this authorization is enclosed for that purpose.
- ☒ Attached is a postcard for date-stamped return as confirmation of receipt of these materials.

Date: October 25, 2004



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